Practice Guide for Supervisors

Case Plan Implementation

MITEAM COMPETENCY

Case plan implementation details the who, what, where, when and how with regards to specific tasks and/or objectives for each participating case planning partner (birth parents, foster parents, relatives, caseworker and service providers). Case plan implementation is the utilization of services designed to address a family's underlying needs as identified through the assessment and case planning process. Case plan implementation begins at initial plan development and continues throughout case closure.

Observation:

- Helps the individual(s) identify people who are supportive.
- Addresses reasons for reluctance to including specific team members.
- Facilitates teaming.
- Asks the individual(s) what the team member(s) (informal or formal) have done to provide support.
- Requests individual(s) input regarding the effectiveness of services.
- Asks the individual(s) how s/he can be of assistance to the family.
- When developing or adjusting the plan, asks for team member's input.

Documentation:

- The team member's suggestions and comments are documented in the case file.
- The family's team met within the required timeframes (FOM 722-6B).
- There is evidence in the documentation that the team implements specific safety activities to address safety concerns of the child(ren)/youth.
- There is evidence in the documentation that the team addresses specific permanency plans.
- There is evidence in the documentation that the team addresses specific issues of well-being for the child(ren)/youth.
- The team regularly reviewed the plan.
- There is evidence in the documentation that service providers were provided with clear and specific service needs for the family.
- There is evidence in the documentation that services were provided in a timely manner.
- There is evidence in the documentation that the child's living arrangement has been fully assessed and determined safe.

Interview:

- The individual(s) was able to identify helpful activities of the worker.
- The individual(s) reports being satisfied with services offered and/or referred.
- The individual(s) described specific examples of the worker acknowledging his/her success (however large or small).
- The individual(s) described specific examples where his/her input was utilized in decision making.

In Supervision:

- The worker was able to identify:
 - O How trauma is addressed in the case plan.
 - How the parent participates in the process of change.
 - O How successes are acknowledged (however large or small).
 - How the case has progressed and what to expect in next 90 days.

FIDELITY MEASURES

POLICY REQUIREMENTS	 Parental participation in the development of the case plan is required. Caseworker must provide service referrals within 30 days of initial out-of-home placement. Caseworker must identify follow-up steps to obtain compliance when parents decline to participate in services. The Parent Agency Treatment Plan (PATP) must be: Specific to the individual needs of the family and children. Inclusive of the child and family's viewpoints. Written in a manner that is easily understood by all parties. "Active efforts" for American Indian children require the caseworker to take a proactive approach with clients and actively support them in complying with the case plan rather than the case plan be completed by the client alone. 		
KEY	WHERE IN THE	PRACTICE GUIDANCE	
CASEWORKER	LIFE OF THE	TECHNIQUES	
ACTIVITIES	CASE		
KCA 15 CASE PLAN IMPLEMENTATION	Prior to developing case plan.During FTMs	ping case communicate the family's strengths and safety and resiliency needs to service providers, their treatment needs and expectations	
Engage with service providers.	and case reviews.During case monitoring.	 Educate, model and coach caseworkers on how to identify service providers that meet the family's needs/preferences/locations/cultural norms and team with them to support safety, permanency and well-being for children and families. Educate, model and coach caseworkers on how to advocate for the creation of services. If services are not available to address the unique needs of the child and family, work with service provider to develop needed services or identify another provider. Monitor the quality and substance of practice and provide feedback to caseworkers by reviewing case documentation to determine if service providers have been invited to/participated in FTMs and if the focus and outcomes of these contacts support positive achievement of goals/ outcomes for families. 	
KCA 16	Throughout the	Educate, model and coach caseworkers on how to use information	
CASE PLAN	life of the case.	from the family, the safety and risk assessments, FANS and CANS, case record information, and reports from providers to identify	
IMPLEMENTATION		family's strengths and resiliency needs to inform case plan. Coach the worker around assessing for safety concerns and dynamics of coercive control that might be interfering with or hindering	
Clarify specific service needs when making referrals.		 successful completion of the case plan. Educate, model and coach caseworkers to match services to build on strengths and address needs, support the permanency goal and creation of conditions for return/ permanency that must exist in home in order for child to achieve safe permanency. Monitor whether identification of/ referral to services is done in collaboration with child and family in a way that will best meet identified needs and engage families in active service participation; discuss strategies to improve collaboration with caseworkers. Monitor case planning to ensure that services have a reasonable chance of supporting conditions for return/permanency, create child well-being and provide feedback to caseworkers. Educate, model and coach caseworkers to collaborate with families to determine which services are most appropriate for them before considering service availability. 	

		 Review case notes and provide feedback to caseworkers on the specificity and relevance of referrals to meeting needs of child and family to support safe permanency and well-being. Review case notes and provide feedback to caseworkers on setting clear expectations for service providers regarding parental/caregiver behavioral changes expected as result of intervention.
CASE PLAN IMPLEMENTATION Provide services promptly and on an ongoing basis to increase safety, reduce risk, address well- being and promote timely permanency.	 At case plan development and reviews. At service referrals. Caseworker visits and FTMs. When situation changes. 	 Monitor the completion of safety and risk assessments early and often throughout the life of a case according to required timeframes. Educate, model and coach caseworkers on expectations for using assessment information to identify safety issues and develop plans to immediately and reliably control safety threats to keep children safe. Review/provide feedback to caseworkers on strengths/needs of safety plans. Provide feedback, support for developing plans that ensure immediate, reliable protection. Observe and assess caseworker's ability to monitor case plans and progress toward achievement of permanency goals, determine that a change in plan, goal or services is needed, and negotiate needed changes with parents, children/youth, and service providers in FTMs. Provide feedback. Educate, model and coach caseworkers on how to determine a change in case plan, services/service provider or permanency goal is necessary, how to meet with parents/children/youth and service providers to discuss needed changes. Educate, model and coach caseworkers on how to evaluate the effectiveness of services to produce desired results/changes and discuss these assessments with service providers to focus/refocus treatment. Monitor the quality and substance of caseworker practice by scheduling regular case conferences to review case plans to ensure their relevancy to progress and recent events/emerging needs and that case plans can reasonably be expected to achieve permanency and well-being goals timely. Provide feedback.
KCA 18 CASE PLAN IMPLEMENTATION Use caseworker visits to mobilize services.	Caseworker visits.	 Educate, model and coach caseworkers on how to discuss with families and children their perception of the effectiveness of services, how services are helping them make progress toward their goals, their satisfaction with the services/service provider, emerging issues, changing needs in service delivery, or changes in goals/activities/ steps in case plans. Monitor the quality and substance of caseworker practice by reviewing case documentation to determine if the worker is having individual visits with parents and children and if the content of these discussions is being used to drive and support case plan implementation. Provide feedback on improving compliance and quality of visits to support plan implementation.
KCA 19 CASE PLAN IMPLEMENTATION Evaluate the appropriateness and effectiveness of services.	 Case plan reviews. Caseworker visits and FTMs. When situation changes. 	 Observe and provide feedback on caseworker's ability to monitor case plans and progress toward achievement of permanency goals, determine that change in plan, goal or services is needed, and identify and negotiate needed changes with parents, children/youth, and service providers in FTMs. Set expectations regarding frequency/ focus of communication with service providers to include goals, progress toward goals, changing needs and effectiveness of services. Observe and provide feedback to caseworkers on the timing and quality of their interaction with service providers. Educate, model and coach caseworkers on how to determine a change in case plan, services/service provider or permanency goal is

		 necessary and on how to meet with family/children/youth and service providers to discuss needed changes. Educate, model and coach caseworkers on how to evaluate the effectiveness of services to produce desired results/changes and discuss these assessments with service providers to focus/refocus treatment. Monitor the quality and substance of caseworker practice by scheduling regular case conferences with each worker to evaluate effectiveness of services being provided to ensure their relevancy and responsiveness to changing needs. Make sure that continued services can reasonably be expected to support the capacity of families to achieve permanency goals timely. Share findings and provide feedback to caseworkers.
KCA 20 CASE PLAN IMPLEMENTATION Provide services at the time of discharge and case closure.	 At final FTM. Reassessment. Case closure. 	 Monitor that discharge FTMs are conducted prior to discharge and that post-discharge needs and services are identified and in place prior to the child leaving foster care and provide feedback to caseworkers. Review case documentation and provide feedback to caseworkers on the clarity, execution and description of post-discharge services, what they are, why they are needed, when they will start and end, how they will be monitored, and how they know they have been effective. Educate, model and coach caseworkers on how to talk openly with children and families about what they will need to ensure safe permanency after discharge and what services or supports will best meet those needs.